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BURGESS HILL URBAN DISTRICT COUNCIL.

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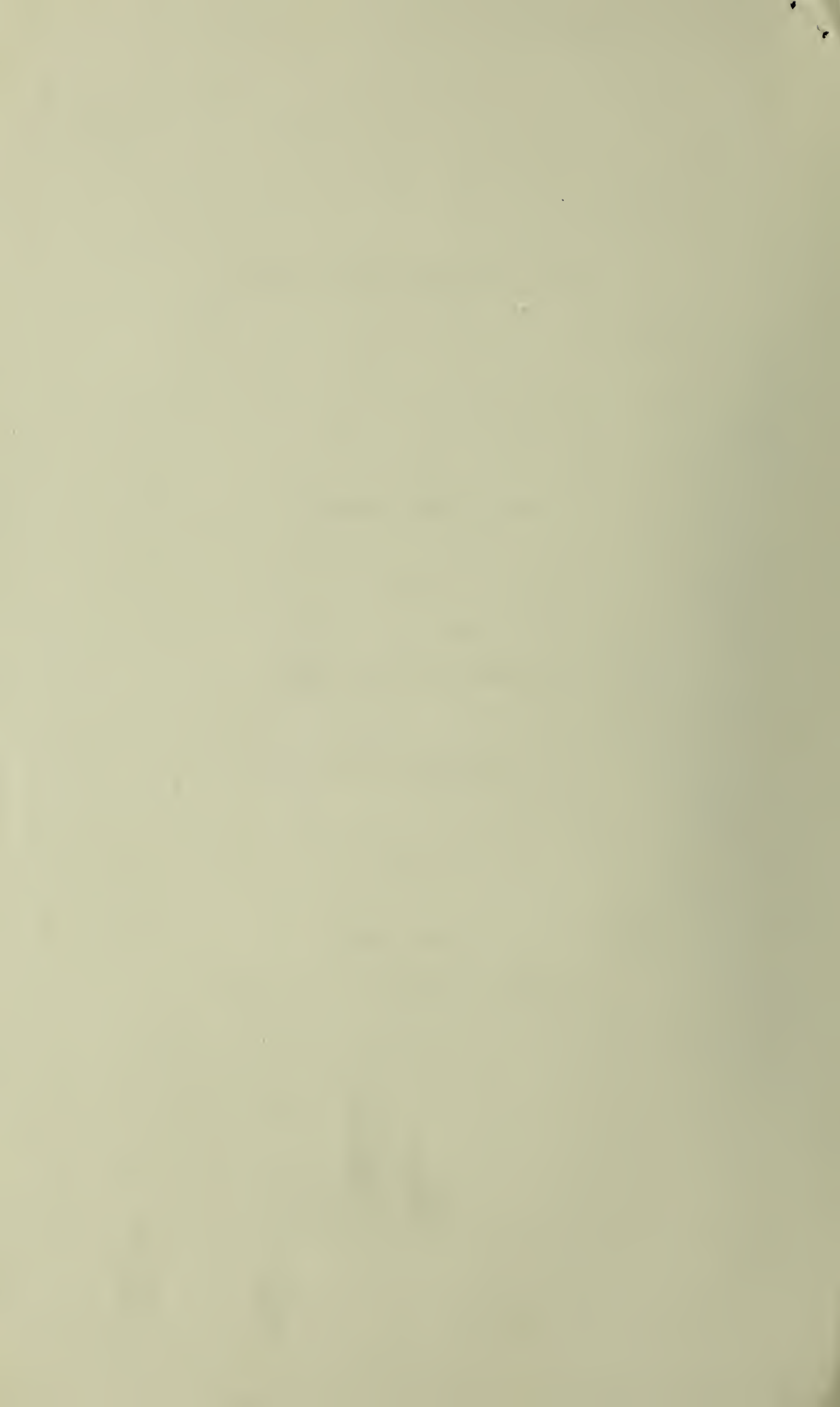
MEDICAL OFFICER OF HEALTH

For the YEAR 1953

by

WILLIAM B. STOTT,

L.R.C.P. & S. (Edin.), D.P.H. (Camb.).



R E P O R T

of

THE MEDICAL OFFICER OF HEALTH.

To the CHAIRMAN AND MEMBERS OF THE BURGESS HILL URBAN DISTRICT COUNCIL.

I have the honour to submit my Annual Report for the year 1953.

The Crude Death Rate is 12.92 and this figure when adjusted gives a corrected Death Rate of 9.69 which compares with 11.4 for England and Wales.

The Infant Mortality Rate is 8.90 as compared with 26.8 for the country as a whole and with 9.43 for 1952.

No deaths occurred during the year from Diphtheria, Scarlet Fever, Whooping Cough, Measles or Typhoid Fever.

DIPHTHERIA IMMUNISATION.

Since July, 1948, the County Council has been responsible for the administration of this scheme, and the County Medical Officer of Health has delegated the duties in connection with local arrangements to your Medical Officer of Health.

For the ninth consecutive year no case of diphtheria occurred in this district.

Details of the immunisation position will be found on page 9 and it will be seen that the percentage of children 0 - 5 years who have been immunised is 81, the 5 - 15 years is 98 and the total 0-15 years is 93. This high percentage has been maintained only by a very thorough method of following up each child from birth until he or she leaves school at 15 years of age, and ensuring that the parents fully understand the advantages of immunisation.

In the years prior to 1940 - the year when the Ministry of Health instituted its immunisation campaign an average of 60,000 cases of diphtheria were notified each year in England and Wales, and the deaths from this disease averaged 3000. In 1952 cases had dropped to 376 and deaths to 32, a wonderful tribute to the efficacy of the procedure. One drawback from this tremendous fall in the incidence of diphtheria is that parents do not dread the disease as they used to do and more persuasion is needed to achieve a high percentage of acceptances. Parents actually are more concerned about their children contracting whooping cough than diphtheria and advantage is now taken of this fact in this district by combining diphtheria and whooping cough immunisation. The most dangerous age for whooping cough is during the first year of life, approximately 60 per cent of all deaths from this disease in England and Wales occurring in this group, and it is for this reason that in this area we recommend that immunisation should commence at three months and every parent when the child reaches this age receives a letter from the office explaining the procedure and giving the parent the opportunity of taking the child to his own doctor or to one of the clinics which Dr. Duke, my Deputy, attends.

Parents are given the opportunity of having their children immunised against diphtheria only and in this case it is recommended that inoculations should commence at the eighth month. The combined scheme has only been functioning for 18 months but we find that the majority of parents are accepting the new procedure, only a small minority preferring to have the diphtheria immunisation alone.

We are using Parke Davis W.D.P. for the combined immunisation and it has the great advantage that it does not contain alum which is reputed to increase the risk of post-inoculation poliomyelitis when that disease is prevalent in

the district. It has the added advantage that it can be and is given sub-cutaneously as against intra-muscularly - again being much less likely to cause paralysis. Immunisation against whooping cough has only been running for eighteen months so it is too early yet to assess its effectiveness. During the past eighteen months 10 infants have contracted whooping cough and of these only one had received protective inoculation but the disease developed before completion of the course.

The Local Press can be of great help to a Medical Officer of Health in giving publicity to matters which he considers the public should be informed about and I would like to acknowledge the valuable assistance I have received in the past at their hands. I should like to take this opportunity of informing parents that, although the number of cases of diphtheria has decreased considerably in this country, when it occurs it is still a serious disease, that it does kill children and that immunisation protects, but it is too late to start protective treatment once the infection has invaded a household or school.

The procedure adopted is for three injections to be given at monthly intervals, followed by a Schick test three months after the final injection. When the child reaches the age of five years a reinforcing injection of A.F.T. (diphtheria prophylactic) is given in order to boost the child's immunity and at 10-11 years he is Schick tested and receives a further injection if the immunity is shown to have waned. In practice approximately 80 per cent of children still retain their protection at this age.

I am pleased to acknowledge the willing assistance I have received from all members of the team, Dr. H.L. Duke, Deputy Medical Officer of Health, who does all the Schick testing and reading, Miss F.M. Dean, Immunisation Clerk, and the Health Visitors and District Nurses who visit all parents who have not accepted immunisation and endeavour to persuade parents to have their children protected.

I have to report with great regret that Miss Dean, who has been connected with the Immunisation Scheme for the past 12 years, resigned at the end of the year. It was due in no small part to her efforts that the percentage of immunised children in this district has remained so high.

OUTBREAK OF FOOD POISONING.

On the evening of 13th February a medical practitioner in Burgess Hill telephoned me and said that he had been called that day to five families in the town who had been suffering from severe sickness and diarrhoea. He mentioned that there appeared to be a common factor in that all the families received their milk from one dairy.

On the following morning I carried out investigations from the particulars supplied by the general practitioner and his partners. I found that all the persons affected had consumed milk from the same supply - a producer/retailer of T.T. milk - and that the symptoms which consisted of severe sickness, diarrhoea and prostration came on 3 to 4 hours after consumption of the milk and lasted for various times up to several hours. The symptoms suggested staphylococcus food poisoning.

I obtained a bottle of milk from one of the households and later took it to the Public Health Laboratory in Brighton. I also visited the farm and informed the farmer what had occurred. The farmer was most co-operative and he informed me that both men who handled the milking machines were quite well, but that one cow in the herd of 40 had an injured teat but in his opinion it was not septic and he had not excluded the milk from that cow. I examined the teat and although it did not appear to be septic I informed the farmer that the milk from this cow should not be used for human consumption. I also recommended that a thorough examination of all the udders and teats be carried out, and that if any of the cows were found to have sores on their teats the milk from those cows should not be used for human consumption.

I called at the farm the next morning and the farmer informed me that another cow was found to have a sore on its teat and that the milk from that cow was not being used for human consumption. I took swabs from the teats of both cows and also from the noses and throats of both milkers whose hands were free from septic sores. During the day I received many more notifications of food

poisoning, the total number being 36. Of these it was found that 27 received milk from the same dairy and the other nine, whose symptoms differed from the others in that the sickness and prostration were much less severe, received their milk from other sources.

On the 16th I received a telephone message from the Public Health Laboratory that a heavy dose of *Staphylococcus pyogenes* had been isolated from the bottle of milk and I discussed the whole position with Dr. Jameson, the Medical Director. It was decided that individual samples of milk should be taken from each cow and I called at the Laboratory and obtained 40 empty bottles and then proceeded to the farm where, with the co-operation of the farmer, a sample of milk from each quarter of every cow in the herd was obtained and despatched to the Laboratory.

On the 18th a report was received from the Laboratory that *Staphylococcus pyogenes* was present in the nose of one of the milkers and also from the teat of one of the cows. Samples of faeces had been obtained from nine of the persons suffering from food poisoning who had consumed the suspected milk and *Staphylococcus pyogenes* was isolated in six, the other three being negative. Samples of faeces were also taken from three persons with the less severe symptoms and whose milk was not from the suspected supply and *Shigella Sonnei* was isolated from them showing that we were dealing with two distinct and separate outbreaks.

On the 20th I received a report from the laboratory that *Staphylococcus pyogenes* had been isolated from nine of the cows.

On the 23rd I received a report from the laboratory that the strain of *Staphylococcus* obtained from the bottle of milk, the cowman's nose and the sore teat were all of the same bacteriophage type 53+, and later I was informed that the same strain was isolated from the faeces of the sufferers. This particular strain was not isolated from any of the nine individual milks which were positive for *Staphylococcus pyogenes*, although one of the positives was from the cow with the infected teat.

The farmer was informed that he should obtain the services of his Veterinary Officer for treatment of the cow with the septic teat and that on no account was the milk from this cow to be used for human consumption until it was certified as being free from infection. Subsequently quarter samples of milk were taken from this cow and were reported positive for *Staphylococcus pyogenes* and a further report stated that the strain was the same (53+) as the one which caused the original outbreak. I ascertained from the farmer that normally he puts all his milk into a refrigerator after bottling in the evening but that on the Friday night, prior to the outbreak, some of the milk was left in the dairy and not put in the refrigerator. It would appear, therefore, that the milk became infected from the cow's teat and that multiplication took place during Friday night in the milk bottles which were not put in the refrigerator. The milk was consumed at various times during the Saturday and Sunday and approximately three hours after its consumption symptoms consisting of severe sickness and diarrhoea commenced.

The above is an account of an outbreak of *Staphylococcus* food poisoning due to the consumption of milk and it probably originated from the cowman with the infected nose who in turn infected the injured teat of the cow.

The lesson that can be learnt from this outbreak is that although milk from a Tuberculin Tested herd is probably safe as far as the tubercle bacillus is concerned there is always the risk, small though it may be, that it can cause other infections. If this milk had been pasteurised there would have been no outbreak.

FOOD HYGIENE.

Frequent inspections of all catering establishments and food shops are carried out. The general standard of hygiene has improved during the past few years and it is unusual to come across any serious fault in the method of handling food or in the cleanliness of the premises. During the year advice was given on personal and kitchen hygiene to the management and staff at the time of inspection.

MILK SUPPLY.

A Survey was carried out in 1948 to ascertain the percentage of the types of milk being consumed in this district and a similar survey has been completed recently. The following are the figures for the two periods:-

Type of Milk	1948	1954
Tuberculin Tested ..	30	25
Pasteurised	43	72
Ordinary	27	3

As will be seen there has been a large decrease in the consumption of ordinary milk and a corresponding increase in pasteurised milk showing that the public are now aware of the risk in the consumption of ordinary milk and that pasteurised milk is a safe milk.

The Ministry of Food are empowered by the Milk (Special Designations) Act, 1950, to specify areas in which only heat treated or tuberculin tested milks are allowed to be sold by retail and at the present time approximately 60 per cent of the population of England and Wales is covered in this way. The areas already specified are chiefly urban in character and extensions of areas are to be made as and when plant for heat treatment becomes available. It is hoped that the Ministry will see its way to schedule this district as a specified area in the near future.

WATER SUPPLY.

1. The water supply of the district, provided by the Burgess Hill Water Company, has continued to be satisfactory in quality. There has again been no shortage of water during the summer months.
2. The Company carried out monthly bacteriological examination of the raw water and all were satisfactory. The water was chlorinated.
3. The supply is not liable to plumbo-solvent action.
4. There was no evidence of the supply being contaminated.
5. With the exception of three houses, all are provided with a piped supply direct to the house.

My thanks are due to Mr. J.W.Hobson, Sanitary Inspector, for his help and co-operation and for the particulars supplied for this report.

I should like to take this opportunity of expressing my appreciation of the consideration, support and assistance I have received from the Chairman and Members of the Public Health Committee.

I have the honour to be, Ladies and Gentlemen,

Your obedient Servant,

W. B. STOTT.

Medical Officer of Health.

PUBLIC HEALTH STAFF.

<u>Medical Officer of Health:</u>	William B.Stott, L.R.C.P. & S. (Edin.), D.P.H. (Camb.).
<u>Deputy Medical Officer of Health:</u>	H.L.Duke, O.B.E., M.D., Sc.D. (Camb.)., D.T.M. & Hy.
<u>Sanitary Inspector:</u>	J.W.Hobson, M.S.I.A., Certified Meat Inspector.
<u>Clerks to the M.O.H.:</u>	Miss G.L.Everson Miss G.J.Shuttlewood.
<u>Clerk to the S.I.:</u>	Miss J.Hardcastle.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Summary of Statistics for the years:

	1951	1952	1953
Area of District in Acres	2,024	2,024	2,024
Population estimated to middle of year ..	8,685	8,748	8,748
Rateable Value	£69,437	£69,761	£71,724
Sum represented by a Penny Rate	£272	£275	£280
Density of Population (persons per acre) ..	4.29	4.32	4.32
Number of houses	2,570	2,585	2,653
Birth Rate per 1,000 population	13.01	12.12	12.80
Death Rate per 1,000 population	14.51	14.17	12.92
Infant Mortality Rate	26.55	9.43	8.90

CAUSES OF DEATH IN BURGESS HILL URBAN DISTRICT.

	<u>Males.</u>	<u>Females.</u>
1. Tuberculosis, respiratory	-	-
2. Tuberculosis, other	2	-
3. Syphilitic disease	-	-
4. Diphtheria	-	-
5. Whooping Cough	-	-
6. Meningococcal infections	-	-
7. Acute Poliomyelitis	-	-
8. Measles	-	-
9. Other infective and parasitic diseases ..	-	-
10. Malignant neoplasm, stomach	2	-
11. Malignant neoplasm, lung, bronchus ..	4	1
12. Malignant neoplasm, breast	-	3
13. Malignant neoplasm, uterus	-	-
14. Other malignant and lymphatic neoplasms ..	4	6
15. Leukaemia, aleukaemia	-	-
16. Diabetes	-	-
17. Vascular lesions of nervous system ..	6	14
18. Coronary disease, angina	7	8
19. Hypertension with heart disease	1	1
20. Other heart disease	9	20
21. Other circulatory disease	-	2
22. Influenza	-	3
23. Pneumonia	2	1
24. Bronchitis	-	1
25. Other diseases of respiratory system ..	-	-
26. Ulcer of stomach and duodenum	-	-
27. Gastritis, enteritis and diarrhoea ..	-	2
28. Nephritis and nephrosis	2	-
29. Hyperplasia of prostate	1	-
30. Pregnancy, childbirth, abortion	-	-
31. Congenital malformations	-	-
32. Other defined and ill-defined diseases ..	4	1
33. Motor vehicle accidents	-	-
34. All other accidents	1	2
35. Suicide	2	1
36. Homicide and operations of war	-	-
Totals ..	47	66

VITAL STATISTICS.

Birth-rates, Death-rates, Analysis of Mortality, Maternal Mortality and Case-rates for Certain Infectious Diseases in the Year 1953. Provisional Figures based on Quarterly Returns.

	England and Wales	160 County Boroughs and Great Towns (including London)	160 Smaller Towns (Resident Population 25,000 - 50,000 at 1951 Census)	London Administrative County	Burgess Hill Urban District Council.
	Rates per 1,000 Home Population				
<u>Births</u>					
Live Births	15.5	17.0	15.7	17.5	(12.80 13.31 ✱
Still Births	(0.35 22.4 (a)	0.43 24.8 (a)	0.34 21.4 (a)	0.38 21.0 (a)	0.23 17.54 (a)
<u>Deaths</u>					
All Causes	11.4	12.2	11.3	12.5	(12.92 9.69 ✱
Typhoid and Para-typhoid	0.00	0.00	-	-	-
Whooping Cough	0.01	0.01	0.00	0.00	-
Diphtheria	0.00	0.00	0.00	0.00	-
Tuberculosis	0.20	0.24	0.19	0.24	0.23
Influenza	0.16	0.15	0.17	0.15	0.34
Smallpox	0.00	0.00	0.00	-	-
Acute poliomyelitis (including polio-encephalitis)	0.01	0.01	0.01	0.01	-
Pneumonia	0.55	0.59	0.52	0.64	0.34
<u>NOTIFICATIONS</u> (Corrected)					
Typhoid Fever	0.00	0.00	0.00	0.01	-
Paratyphoid Fever	0.01	0.01	0.01	0.01	-
Meningococcal infection	0.03	0.04	0.03	0.03	-
Scarlet Fever	1.39	1.50	1.44	1.02	0.11
Whooping Cough	3.58	3.72	3.38	3.30	5.72
Diphtheria	0.01	0.01	0.01	0.00	-
Erysipelas	0.14	0.14	0.13	0.12	0.11
Smallpox	0.00	0.00	0.00	-	-
Measles	12.36	11.27	12.32	8.09	7.66
Pneumonia	0.84	0.92	0.76	0.73	0.57
Acute poliomyelitis (including polio-encephalitis)					
Paralytic	0.07	0.06	0.06	0.07	-
Non-paralytic	0.04	0.03	0.04	0.03	-
Food Poisoning	0.24	0.25	0.24	0.38	-
Puerperal Pyrexia	18.23 (a)	24.33 (a)	12.46 (a)	28.61 (a)	0.11 (a)
<u>Deaths</u>					
	Rates per 1,000 Live Births				
All causes under 1 year of age	26.8 (b)	30.8 (b)	24.3 (b)	24.8 (b)	8.90 (b)
Enteritis and diarrhoea under < years of age	1.1	1.3	0.9	1.1	-

✱ Corrected death rate; Corrected birth rate.

(a) Per 1,000 Total (Live and Still) Births. (b) Per 1,000 related Live Births.

	<u>Puerperal Sepsis</u>	<u>Others</u>	<u>Total</u>
The Maternal Mortality Rates for England and Wales are as follows per 1,000 total births	0.01	0.18	0.28
The Maternal Mortality Rates for the Burgess Hill Urban District are as follows:-	Nil	Nil	Nil

BIRTHS AND DEATHS.

Births and Birth Rate:

The following table shows the Births registered for the year 1953:-

					<u>Male.</u>	<u>Female.</u>	<u>Total.</u>
Legitimate	..	..	..	..	59	51	110
Illegitimate	..	..	..	..	-	2	2
			Total	..	59	53	112

This gives a rate of 12.80 per 1,000 population.

					<u>Male.</u>	<u>Female.</u>	<u>Total.</u>
Total Stillbirths	..	..	..		2	-	2
Legitimate	..	..	..		2	-	2
Illegitimate	..	..	..		-	-	-

Deaths and Death Rate:

The following table shows the Deaths registered for the year 1953:-

<u>Male.</u>	<u>Female.</u>	<u>Total.</u>
47	66	113

This gives a mortality rate of 12.92 per 1,000 population.

The corrected death rate is 9.69

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

Laboratory Facilities:

All milk and water samples, infectious disease and food poisoning specimens are sent to the Public Health Laboratory, Brighton. Medical practitioners send the specimens direct to the Laboratory, and they receive the report by telephone, a copy of such report being sent to this office. My thanks are due to Dr. J.E. Jameson, Medical Director, for his informative reports and helpful advice on many occasions.

Ambulance Facilities:

Cases of infectious diseases are now removed by one of the two British Red Cross Society's ambulances stationed at Lavender's Garage, Sussex Road, Haywards Heath.

Hospital Accommodation for Infectious Diseases:

Twenty-six beds are available at the Mid-Sussex Isolation Hospital for the treatment of cases of infectious disease, twelve of these beds are in a cubicle block and the other fourteen in a block consisting of two main wards and side wards. A table on page 10 gives particulars of admissions during the year.

Smallpox.

The South-East Metropolitan Regional Hospital Board state that cases of smallpox occurring in this district should be sent to the River Hospitals (Long Reach), Dartford, Kent.

CLINICS AND TREATMENT CENTRES.

INFANT WELFARE CENTRE:

Burgess Hill	E.S.C.C. Clinic Mill Road, Burgess Hill	1st and 3rd Thursday Dr. on 1st Thursday
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CLINICS:

<u>Diphtheria Immunisation</u>			E.S.C.C. Clinic Mill Road, Burgess Hill	1st Friday 2 - 3.30 p.m.
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<u>Tuberculosis</u>	E.S.C.C. Clinic, Oaklands, Boltro Road, Haywards Heath	Every Thursday except 2nd Thursday.
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<u>Orthopaedic</u>	E.S.C.C. Clinic, Mill Road, Burgess Hill	Tuesday 9 a.m. - 12.30 p.m. Friday 9 a.m. - 12.30 p.m. Dr. usually attends 4th Wednesday at 10.30 a.m. (By appointment).
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<u>Speech Therapy</u>	E.S.C.C. Clinic, Mill Road, Burgess Hill	Wednesday 2 p.m. (By appointment).
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<u>Child Guidance</u>	<u>East Grinstead:</u> Moat Road	Every Friday 10 a.m. (By appointment).
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Lewes:

Castlegate House	Every Wednesday 10 a.m. (By appointment).
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Hove:

33 Clarendon Villas	Tuesday 10 a.m. Thursday 2 p.m.
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<u>Minor Ailments</u>	E.S.C.C. Clinic, Mill Road, Burgess Hill	Weekdays (Mondays to Fridays) 9 a.m. - 10 a.m.
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<u>Dental</u>	E.S.C.C. Clinic, Mill Road, Burgess Hill	By appointment.
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<u>School Clinic</u>	E.S.C.C. Clinic, Mill Road, Burgess Hill	Dr. Fitzgerald. (By appointment).
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<u>Family Planning</u>	E.S.C.C. Clinic, Oaklands, Boltro Road, Haywards Heath	2nd and 4th Wednesday 2 p.m. Dr. each session. (By appointment).
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<u>Sub-Fertility</u>	E.S.C.C. Clinic, Oaklands, Boltro Road, Haywards Heath	1st Wednesday 2 p.m. Dr. each session. (By appointment).
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<u>Venereal Diseases</u>	..		Facilities available at Royal Sussex County Hospital, Brighton.	
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<u>Men</u>	Monday	4.30 p.m.
			Wednesday	9.30 a.m.
			Thursday	1.30 p.m.

<u>Women and Children</u>	..		Tuesday	1.30 p.m.
			Thursday	10 a.m.
			Saturday	9.30 a.m.

New cases must attend at least one hour before the Clinic closes.

DIPHTHERIA IMMUNISATION.

0 - 15 Years of Age.

Number on roll	..	..	..	..	2,216
Number immunised	..	..	..	..	2,065
Percentage	..	..	..	..	93

0 - 5 Years of Age.

Number on roll	..	..	..	..	645
Number immunised	..	..	..	..	522
Percentage	..	..	..	..	81

The table below shows the immunisation figures for every school in the district:-

	On Roll	Immunised	Percentage
<u>SCHOOLS: Primary and County Secondary.</u>			
Junction Road	418	414	99
Burgess Hill South	347	341	99
Burgess Hill County Secondary .	264	256	97
	1,029	1,011	98
<u>NOT YET AT SCHOOL, or at school outside</u> <u>our area</u>	184	177	96
<u>SCHOOLS, Private</u>	358	355	99
	1,571	1,543	98

During the year:- 97 children were immunised
225 children were Schick tested
90 children had a reinforcing injection.

VACCINATION.

Eighty-one children were vaccinated under the age of one year — a percentage of 72.

CASES OF INFECTIOUS DISEASE IN AGE GROUPS.

Disease.	Total Cases notified	Under 1 year	1 - 2	2 - 3	3 - 4	4 - 5	5 - 10	10 - 15	15 - 20	20 - 35	35 - 45	45 - 65	65 and over	Cases admitted to Hospital	Total Deaths
Scarlet Fever	1	-	-	-	-	1	-	-	-	-	-	-	-	-	-
Erysipelas	1	-	-	-	-	-	-	-	-	1	-	-	-	-	-
Pneumonia	5	-	-	-	-	-	-	-	-	-	-	2	3	-	2
Febrile	1	-	-	-	-	-	-	-	-	1	-	-	-	-	-
Pyrexia	1	-	-	-	-	-	-	-	-	1	-	-	-	-	-
Measles	67	-	7	6	13	4	25	6	3	2	1	-	-	1	-
Whooping Cough	50	5	5	2	10	4	15	4	-	1	3	-	1	-	-
Totals	125	5	12	8	23	9	40	10	3	5	4	2	4	1	2

TUBERCULOSIS - NEW CASES AND MORTALITY, 1953

Age Groups	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	Males	Females	Males	Females	Males	Females	Males	Females
0 - 1	-	-	-	-	-	-	-	-
1 - 5	-	1	-	-	-	-	-	-
5 - 15	-	-	-	-	-	-	1	-
15 - 25	1	-	-	-	-	-	-	-
25 - 35	-	-	-	-	-	-	1	-
35 - 45	-	-	-	-	-	-	-	-
45 - 55	-	-	-	1	-	-	-	-
55 - 65	1	-	-	-	-	-	-	-
65 & over	-	-	-	-	-	-	-	-
Totals	2	1	-	1	-	-	2	-

THE MID-SUSSEX ISOLATION HOSPITAL.

I am indebted to the Matron, Miss J.M.Reid, for the following particulars of cases admitted during the year.

DISEASE	Cuckfield Rural District	Cuckfield Urban District	Burgess Hill Urban District	East Grinstead Urban District	Uckfield Rural District	Other Districts	Total
Poliomyelitis	1	-	-	-	1	1	3
Observation Poliomyelitis	-	1	-	-	2	-	3
Scarlet Fever	11	-	-	1	6	1	19
Scarlet Fever and Chickenpox	2	-	-	-	-	-	2
Measles	5	2	1	6	2	4	20
Measles and Pneumonia	3	1	-	1	1	1	7
Measles and Bronchitis	-	-	-	-	-	2	2
Measles and Meningo-encephalitis	-	1	-	-	-	-	1
Rubella	-	-	-	-	-	1	1
Whooping Cough	2	1	-	-	-	-	3
Whooping Cough and Pneumonia	-	-	-	-	-	1	1
Observation Whooping Cough	1	-	-	-	-	-	1
Dysentery	-	-	-	-	-	2	2
Chickenpox	-	-	-	-	-	5	5
Erysipelas	1	1	1	1	-	-	4
Mumps	-	-	-	-	-	5	5
Observation Mumps	-	-	-	-	-	1	1
Tonsillitis	1	-	-	-	1	-	2
Quinsey	1	-	-	-	-	-	1
Broncho-pneumonia, contact Measles	1	-	-	-	-	-	1
Pneumococcal Infection of throat with Meningism	-	-	-	-	-	1	1
Influenza	-	1	-	-	-	-	1
Lead Poisoning	-	-	1	-	-	-	1
Tuberculosis (Pulmonary)	2	-	1	-	-	23	26
Totals	31	8	4	9	13	48	113

The Cubicle Block allowed twenty-three different diseases, observation cases or diseases with complications to be dealt with.

SANITARY SUPERVISION OF THE AREA.

Mr. Hobson, Sanitary Inspector, has furnished the following report on the sanitary supervision of the district.

Summary of Inspections.

<u>Housing:</u>	Under Housing Acts	21	
	Under Public Health Acts	218	
	Revisits	318	
	Rehousing Visits	<u>260</u>	817
<u>Public Health Acts:</u>	Infectious Disease	17	
	Premises Disinfected	8	
	Infestations dealt with	29	
	Moveable Dwellings	45	
	Smoke Inspections	3	
	Watercourses	3	
	Water Supplies	<u>1</u>	106
<u>Food Premises:</u>	Bakehouses	16	
	Slaughterhouses	3	
	Ice-Cream	16	
	Catering Establishments	27	
	Licenses Premises	1	
	Foodshops	50	
	Dairies	<u>16</u>	129
<u>Trade Premises:</u>	Factories - Mechanical Power	2	
	Factories - Non-mechanical	3	
	Petroleum Acts	21	
	Pet Animals Act	3	
	Shops Act	<u>1</u>	30
<u>Miscellaneous:</u>	Arrangements for burials	2	
	Rats and Mice (made by Rodent Operator) ..	2694	
	Swimming Pool	9	
	Unclassified	<u>34</u>	<u>2739</u>
Total visits			<u>3821</u>
<u>Samples Taken:</u>	Drinking Water (Mains)		
	Chemical and Bacteriological	4	
	Swimming Pool - Bacteriological	1	
	Swimming Pool - (Tested on spot)	9	
	Ice-cream - Bacteriological	42	
	Milk - Bacteriological, Biological and Phosphatase	153	
	Individual quarter samples for tracing Brucella abortus	<u>30</u>	239

COMPLAINTS.

During the year 140 complaints were received (not including reports of rats and mice). The complaints concerned:-

Housing Defects	53
Drainage	55
Infestations (various)	11
Miscellaneous	21

NOTICES.

Number of notices outstanding at end of 1952	26
Number of notices served during 1953:-	
(a) Preliminary	40
(b) Statutory	-
(c) Verbal	<u>44</u>
	110
Number of notices complied with during 1953	76
Number of notices outstanding at end of 1953	34

SUMMARY OF WORK CARRIED OUT DURING THE YEAR.

1. Number of dwelling houses at which structural repairs were carried out	40
2. Number of dwelling houses at which cleansing and redecoration were carried out	4
3. Number of premises at which accumulations and obstructions were removed	8
4. Number of dwelling houses at which renewals, repair or extension of drainage systems were carried out ..	22
5. Number of dwelling houses at which obstructed drainage systems were cleared	56
6. Number of dwelling houses at which drainage system was connected to main sewer and cesspools abolished ..	1
7. Number of dwelling houses at which new dustbins were supplied	2
8. Number of dwelling houses at which overcrowding was abated	1
9. Number of dwellinghouses at which flooding was dealt with	1
10. Number of W.C.s repaired, renewed, or additionally provided	20
11. Number of W.C.s to which fixed wooden seats were abolished	12
12. Number of drains tested	31
13. Number of cesspools emptied	92
14. Number of bakehouses and other food preparing premises to which improvements were carried out	6
15. Number of factories, offices and shops to which improvements were carried out	4

INSPECTION AND SUPERVISION OF FOODS, MEAT, MILK, etc.

Number and type of food premises:

Grocery and provision	30
Butchers	11
Fishmongers	4
Fruit and vegetables	8
Cakes, bread and confectionery	5
Sugar confectionery	14
Hotels, restaurants and cafes	15
Canteens	7
Total	<u>94</u>

Number and type of premises registered under Section 14, Food and Drugs Act, 1928:

For the manufacture of sausages	11
For the manufacture of ice-cream	1
For the storage and sale of	
ice-cream	<u>34</u>
Total	<u>46</u>

No. of inspections carried out:

Ice-cream premises	..	..	16
Other registered premises	..	..	3
Bakehouses	..	..	16
Slaughterhouses	..	..	3
Catering establishments	..	..	27
Licensed premises	..	..	1
Other food shops	..	..	47
Dairies	..	..	16
Total			<u>129</u>

Milk and Dairies Regulations 1949:

Number of Dairies registered	..	6
Number of Distributors on Register	..	5
Number of Producer-distributors	..	2

LICENCES GRANTED UNDER MILK (SPECIAL DESIGNATIONS) REGULATIONS, 1949.

Tuberculin Tested (Dealers)	..	5
Tuberculin Tested (Supplementary)	..	1
Pasteurised (Dealers)	..	6
Pasteurised (Supplementary)	..	1

Sampling:

Milk. (a) Bacteriological Examination.

Number of samples taken	..	86
Number satisfactory	..	63
Number unsatisfactory	..	23

(b) Biological tests for T.B. etc.

Number of samples taken	..	29
Number satisfactory	..	24
Number containing tubercle bacilli	..	0
Number containing Brucella abortus	..	5
Number of individual quarter samples taken for detection of Brucella abortus	..	30

(c) Phosphatase test for Pasteurisation.

Number of samples taken	..	39
Number satisfactory	..	37
Number unsatisfactory	..	2

Ice-Cream. Bacteriological Examination.

Number of samples taken	..	41
Number satisfactory (Grades I and II)	..	38
Number unsatisfactory (Grade III)	..	3

MEAT AND FOOD INSPECTIONS.

Meat: Two slaughterhouses were licensed but only one was used, this being for the occasional slaughter of pigs under Ministry of Food Licences.

Six pigs were slaughtered during the year, and all were inspected.

Food: Forty-two visits were made to various premises for the purpose of food inspection, and the following list shows the amount of foods of various kinds condemned:-

					<u>lbs.</u>
Tinned Ham	..	..	..	..	36
Tinned Meat	..	..	..	..	23
Tinned Ox Tongue	..	..	..	..	6
Tinned Fish	..	..	..	..	28
Tinned Vegetables	..	..	..	..	21
Tinned Soups	..	..	..	..	18
Tinned Milk	..	..	..	..	19
Tinned Fruit	..	..	..	..	281
Tinned miscellaneous foods	..	..	..	..	12
Pickles and sauces	..	..	..	..	15
Preserves etc.	..	..	..	..	26
Cereals	..	..	..	..	30
Meat	..	..	..	..	61
Liver	..	..	..	..	4
Sausages	..	..	..	..	60
Fish	..	..	..	..	14
Potatoes	..	..	..	..	<u>224</u>
			Total		<u>878</u>

Total; = 7 cwts. 3 qtrs. 10 lbs.

Also 50 bottles various cordials etc.

Condemned food is generally removed to the Council refuse tip where it is destroyed by burning, but occasionally it is possible to arrange for some to be used for feeding animals.

RATS AND MICE.

Mr. S.W.Cook who is the full-time Rodent Operator for the District has been kept fully occupied dealing with infestations of rats and mice.

136 complaints were received and 2694 visits were made to 1242 separate premises. 86 infestations of rats and 49 of mice were found and dealt with. The estimated kill was 480 rats and 750 mice. These figures for infestation are lower than in the previous year and it is to be hoped that this decrease will continue.

A free service is provided for the treatment of private houses and a charge is made for business premises.

When not engaged in actual treatment the Operator's time is occupied in making surveys of the district in search of infestations.

The Council's refuse tip receives regular attention and has remained free from serious infestation. Two treatments have been carried out during the year.

The annual test-baiting of the whole sewerage system was carried out, no infestation being found.

SEWERAGE AND CESSPOOL.

One further house was connected to the sewerage system and the cesspool abolished.

Another cesspool was converted to a septic tank system having a percolating filter. A small electrically driven pump was installed, controlled by a float switch which pumps the final clear effluent to a surface water drain.

The cesspool emptying scheme was continued unchanged and worked quite satisfactorily, 92 emptyings being carried out. This service, for which a small charge is made appears to be much appreciated.

With regard to sewerage generally, a considerable amount of new building is taking place in areas which cannot be connected to the existing sewers by gravity, and a further sewage pumping station has been erected to deal with the Station Road/London Road area. There are now three of these subsidiary stations in use in the district.

HOUSING.

Considerable progress has been made in the provision of new dwellings, mainly by the introduction of a proprietary type of non-traditional construction, namely the "Cornish Unit" — 28 two-bedroomed flats and 16 three-bedroomed houses — 44 dwellings in all — were erected in a period of nine months and this is believed to be almost a record. The buildings are of a very pleasing appearance and the interiors are convenient and well fitted out. The tenants find them very satisfactory and the Council is well pleased with its venture into the fields of "new traditional" construction.

A further scheme of 46 Cornish Units has been approved and work has already commenced on the first part of the scheme comprising 20 dwellings.

In addition, there are 28 traditional brick built houses under construction in the same part of the district.

Other schemes planned for the future include blocks of flats on land in the centre of the town.

The completion of the above schemes will considerably reduce the waiting list, and will in addition enable most of the houses held under requisition to be released. 17 such requisitioned properties have, in fact, already been released.

Whenever possible, transfers are effected to make the best use of the available accommodation.

No formal action was taken under the Housing Act, 1936 during the year, but an informal survey of the older houses in the district was carried out with a view to the preparation of a programme when the new Housing Act is introduced.

A striking feature is the amount of private building now being undertaken in the town. With the virtual lifting of controls during the year many private building schemes were commenced and at the present time there are several hundred new private houses either under construction, recently completed or due to be commenced.

